

whole blood is used for feline-felv tests

ANIMAL HOSPITAL / VETMOBILE  
1501 Wagstaff Rd.  
Paradise, CA 95969  
(530) 877-3000



VetScan®

**FeLV-FIV Rapid Test**

for the Qualitative Detection of FeLV Antigen and FIV Antibodies in Feline Whole Blood, Serum or Plasma

**Kit Contents**

- 25 Test Devices
- 1 FeLV Chase Buffer Bottle
- 1 FIV Chase Buffer Bottle
- 1 Package Insert
- 25 Transfer Pipettes



**REF 250-0000-25**



**FOR VETERINARY USE ONLY**

**IVD**

**ABAXIS**

For patient information, visit [www.abaxis.com/vetinfo](http://www.abaxis.com/vetinfo)

250-000 Rev. B

Distributed By:  
Abaxis, Inc.  
3240 Whipple Rd.  
Union City, CA 94587  
800-822-2847

**ECI**

Abaxis Europe GmbH  
Bunsestr. 9-11  
64347 Gräfelfheim  
Germany  
49 6155 780 210

*Animal Hospital on the Ridge & The VetMobile*

1509 Wagstaff Road  
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(530) 877-3000

**2019 PASH (# 14504)**

(None),

**Feb 08, 2019**

**Invoice Number**  
**44139**

**River (# A)**

Species: Feline  
Sex: Male Neutered  
Age: 8 years and 2 months old  
Breed: DSH  
Coat Color: Chocolate Point  
Weight: 0 lbs.

Date	Description	Qty	Price
02/01/2019	Exam - Courtesy	1.00	\$ 0.00
		<b>Total for River:</b>	<b>\$ 0.00</b>
Dr. Dalia Mathan		<b>Total Invoice:</b>	<b>\$ 0.00</b>
		<b>Previous Balance:</b>	<b>\$ 0.00</b>
		<b>Total Amount Due:</b>	<b>\$ 0.00</b>
		<b>New Balance Due:</b>	<b>\$ 0.00</b>

OWNER	(LAST)	(FIRST)	PHONE	H W	CLIENT #	PATIENT CODE
River	#14504A	MN	DSH		Choc pt W/ white	~8 ~2011
PET NAME	SEX	BREED	COLOR	DOB		

DATE	TREATMENT	CHG	PAID	BAL
1/3/19	Exam- (V) blood for ~24hrs			

10/2 S. BAR  
 (1) H + L chy  
 (clear + noncloudy)  
 Eyes clear  
 light tan  
 Coat somewhat dry + matted  
 Ears dry

PHYSICAL EXAM CHECKLIST

1) GENERAL APPEARANCE	2) INTEGUMENTARY	3) MUSCULOSKELETAL
<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	<input type="checkbox"/> NORMAL <input checked="" type="checkbox"/> ABNORMAL	<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL
4) RESPIRATORY	5) DIGESTIVE	6) GENITOURINARY
<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	<input type="checkbox"/> NORMAL <input checked="" type="checkbox"/> ABNORMAL	<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL
7) EARS	8) NEURAL SYSTEMS	9) LYMPH NODES
<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL
10) EYES	11) CIRCULATORY	12) MUCOUS MEMBRANES
<input type="checkbox"/> NORMAL <input checked="" type="checkbox"/> ABNORMAL	<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL

T P R W

Clear pale normal  
 Mild ↑ REC eff + FCS

Bad S soft nonexpansile

4) vomiting blood cause unknown

P 150ml LPS SC  
 4.5mg Cevimeline SL  
 keep ON to mouth

1/1/19 No (1) or (2) but also  
 no appetite at first  
 will eat some and  
 no (3) no vomit or diarrhea

back to shelter in PM

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**2019 PASH (# 14504)**  
(None),

**Feb 14, 2019**  
**Invoice Number**  
**44200**

**Stray (Found After Fire) (# B)**

Species: Feline  
Sex: Male  
Age:  
Breed: DSH  
Coat Color: (None)  
Weight: 0 lbs.

Date	Description	Qty	Price
02/08/2019	Exam - Courtesy	1.00	\$ 0.00
	Subcutaneous Fluids	1.00	\$ 25.00
	Convenia inj per ml	0.50 ml	\$ 34.00
<b>Total for Stray (Found After Fire):</b>		<b>\$</b>	<b>59.00</b>
Dr. Dalia Mathan		<b>Total Invoice:</b>	<b>\$ 59.00</b>
		<b>Previous Balance:</b>	<b>\$ 0.00</b>
		<b>Total Amount Due:</b>	<b>\$ 59.00</b>
		<b>Check(2878)</b>	<b>\$ 59.00</b>
<b>Total Payments - Thank you:</b>		<b>\$</b>	<b>59.00</b>
		<b>New Balance Due:</b>	<b>\$ 0.00</b>

OWNER

(LAST)

(FIRST)

H  
W

PHONE

CLIENT #

PATIENT CODE

Forrest #14504C | M/N? | DSH | Buckshot |  
 PET NAME SEX BREED COLOR DOB

DATE	TREATMENT	CHG	PAID	BAL
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2/14/19 - Exam- NDS. Lethargic. 3 wks at shelter  
 no specific symptoms

5.7 C. PSSR

① Mild dehydration  
 lots of mucus in  
 + carious teeth

H + L dry  
 excess fa.

bladder small + sensitive  
 to palp

Coat poorly groomed  
 BCS 4/9

Chew pad BNN = 5 low  
 G/dark in sl of a  
 all else dry

CBC uncountable

Felt Noy fin Neg

A Dx open stress?  
 FLUTD?

P Abuse ✓ wrong + try  
 pain meds + fluids

BC

#### PHYSICAL EXAM CHECKLIST

1) GENERAL APPEARANCE	2) INTEGUMENTARY	3) MUSCULOSKELETAL
<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORM	<input type="checkbox"/> NORMAL <input checked="" type="checkbox"/> ABNORM	<input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORM
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1 P R W

*Animal Hospital on the Ridge & The VetMobile*

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**2019 PASH (# 14504)**

(None),

**Mar 18, 2019**

**Invoice Number  
OPEN: 0**

**Jose (# H)**

Species: Feline  
Sex: Male Neutered  
Age: 1 year old  
Breed: DSH  
Coat Color: Badger/White  
Weight: 0 lbs.

Date	Description	Qty	Price
03/07/2019	Exam - additional animal 1	1.00	\$ 37.00
	Convenia inj per ml	0.40 ml	\$ 34.00
	BNP Opth. Oint.	1.00 Tab.	\$ 24.00
<b>Total for Jose:</b>			<b>\$ 95.00</b>

**Lane (# G)**

Species: Feline  
Sex: Male Neutered  
Age: 1 year old  
Breed: DMH  
Coat Color: Black  
Weight: 0 lbs.

Exam Annual: 03/05/2020

Date	Description	Qty	Price
03/07/2019	Exam	1.00	\$ 47.00
	Convenia inj per ml	0.45 ml	\$ 34.00
	BNP Opth. Oint.	1.00 Tab.	\$ 24.00
<b>Total for Lane:</b>			<b>\$ 105.00</b>
<b>Total Invoice:</b>			<b>\$ 200.00</b>

Dr. Dalia Mathan

OWNER	(LAST)	(FIRST)	PHONE	CLIENT #	PATIENT CODE
PET NAME	SEX	BREED	COLOR	DOB	

Lane #14504G | NM | DSH | Black | 1-2 yr

DATE	TREATMENT	CHG	PAID	BAL
7/1/91	Exam DR			
	has been at shelter 1 mo UP symptoms started after neuter Lactating Gray			
	o. T/F			
	Mild OR worse lungs clear Oral exam dry Mild conjunctivitis + mild nasal discharge Heart clear Ears clear			

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P R W

A DR

P 3 day Cervena SC

Rx ZNT 00 ~~5/20 a~~ *DR*  
applied adv until

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(None),

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**Invoice Number**

**OPEN: 0**

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Sex: Male Neutered

Age: 1 year old

Breed: DSH

Coat Color: Badger/White

Weight: 0 lbs.

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03/07/2019	Exam - additional animal 1	1.00	\$ 37.00
	Convenia inj per ml	0.40 ml	\$ 34.00
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**Lane (# G)**

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Sex: Male Neutered

Age: 1 year old

Breed: DMH

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Dr. Dalia Mathan

OWNER

(LAST)

(FIRST)

H  
W

PHONE

CLIENT #

PATIENT CODE

PET NAME

SEX

BREED

COLOR

DOB

Jose #145044 LM DMIT

Bluen

2-3 yr?

DATE TREATMENT

3/11/11 Exam UPT

q has been at shelter (no  
not eating well slight II  
today)

S BTR

O off clean dirt

H + b. chy  
# nasal + ocular discharge  
cat fact  
ECG 4.5/9  
off redness in throatA URI w/ conjunctivitis +  
oral inflammation

Please

P. 32 my concern S

Rx BNP cc BID OU

Applied o/e mult's

2/11

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T P R W

